

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	IP NO.	DATE
FEE DETERMINATION			
O.P.E. CLASSIFIER		21	11/1/01
FORMALTY REVIEW	A. M.	76 SEP	01-24-01
RESPONSE FORMALTY REVIEW	Am	857	8/21/01

INDEX OF CLAIMS

* _____ Rejected
 * _____ Allowed
 * (Through summary) _____ Cancelled
 * _____ Restricted
 * _____ Non-classified
 * _____ Discrepancy
 * _____ Appeal
 * _____ Objected

Claim	Date
1	11/1/01
2	11/1/01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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Best Available Copy